

Edwardsville Campus End User Instructions

FORM – Request for Account Creation or Account Changes

Use: 1) To request a new account, discontinue an account or change an account title.
2) To add or change Fiscal Officer, Delegate, or Unit Officer.

Access: Access the form via the AIS web site, Electronic Forms, Edwardsville campus location.

Complete the form using the following instructions (complete the sections that apply to the type of request above. Unless noted, all fields are REQUIRED).

Instructions:

Special Note: A Fiscal Officer Attestation Statement must be signed and on file for all Fiscal Officers/Delegates.

Please also complete a Request for AIS Access if a change in system access is needed.

Type of Request: Indicate the type of request:

- New Account	Request new account
- Discontinue Account	Request discontinuance of account
- All other changes	Request any other change

Date: Date request initiated

Budget Purpose #: Budget Purpose account number-grants only. Otherwise Admin Accounting will assign.

Information required for change or discontinues account:

- Budget Purpose Number:	Budget Purpose Number
- Budget Purpose Title:	Title/description of account
- Change Fiscal Officer/Delegate	Budget Purpose Number

Budget Purpose Information Section: Complete this section when requesting a new budget purpose or changing the title of a budget purpose value; or when adding, changing or deleting a Fiscal Officer or Delegate.

Budget Purpose Title: Provide requested title for the Budget Purpose

If change, old title: If title change, provide old title

Account Purpose (Choose One):

- Academic Support
- Instruction

- Public Services
- Operations/Maintenance
- Institutional Support
- Student Services
- Scholarships/Fellowships
- Auxiliary Enterprises
- Research

Detailed Purpose of Account: How account will be used (new account request only)

How account will be funded: State what types of resources will support this account (New account request only).

Department /Unit Name: Department and/or department's unit name.

Fiscal Officer Name: Name of account's Fiscal Office, plus signature

Fiscal Officer Title: Title of account's fiscal officer

Fiscal Officer Information: Phone, Campus Box, email

If replacement, name of Fiscal Officer to be replaced: If Fiscal Officer changes provide the name of the Fiscal Officer being replaced.

Fiscal Officer Delegate: Name of Delegate, plus signature. If the requested budget purpose will have more than one delegate, list all on the Fiscal Officer/Delegate line or attach a list of Delegates (e.g. John Doe/Jane Smith/Bill Jones).

Fiscal Officer/Delegate title: Title of Fiscal Officer/Delegate

Delegate information: Phone, Campus Box, email

If Replacement, Name of Delegate to be replaced: If delegate change, provide the name of the delegate being replaced

Dean/Director Approval:

Vice Chancellor Approval:

If new values are assigned, the requester will be notified. A copy of the Account Creation or Account Changes form will be mailed to the requester.

Routing: Print this form, obtain all signatures, and mail to: Pat Rausch, Administrative Accounting, Box 1002.